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University of Nebraska Medical Center

College of Nursing

DOCTOR OF NURSING PRACTICE (DNP)

FINAL DNP PROJECT

EVALUATION OF A RENEWAL ROOM FOR NURSES

by

Danica Lee, Courtney Batra, Megan Knutson

The final DNP project presented to the

Faculty of the University of Nebraska Medical Center College of Nursing

In Partial Fulfillment of the Requirements for the Degree

DOCTOR OF NURSING PRACTICE

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Dr. Cheryl Thompson, PhD, RN

Abstract

Wellness is an emerging and prominent issue in recent years, and specifically has a heavy influence on healthcare institutions and their employees. Having an outlet for self-care is important in developing resilience to life's challenges. A Renewal Room is one approach to encouraging resilience and mental health restoration. The purpose of this study is to evaluate the usability of a wellness room for nurses. Data were collected in the form of an electronic survey that examined the utility (does it do what users need) and usability of the Renewal Room by determining who uses the room, when it is used, why it is used, what resource(s) in the room are beneficial, barriers to room use, feedback regarding areas of improvement, and benefits derived from room use. One hundred forty-eight out of 940 (15.7%) nurses completed the questionnaire. Only 33 of the 148 (22%) nurses indicated they had used the room within the last two months with the most selected barrier to room use being lack of time (81.25%). Every nurse who completed the questionnaire and used the room reported experiencing benefits to room use including decreased stress (97.06%), improved mood (85.29%), improved teamwork (23.53%), and improved focus (55.88%). In this small sample size study, a Renewal Room was found to have an overall positive effect on the staff that used it.

Introduction

The field of nursing continues to evolve with nurses taking on more responsibility, often with fewer resources. As stress levels continue to rise, job performance can be affected. Negative nurse outcomes arise from a wide array of challenges including insufficient staffing, increased workload, pressure to provide quality patient care despite the increased workload, excessive time spent in electronic health record, nurses feeling underappreciated, and high turnover rates (Forstag & Cuff, 2018; Pradas-Hernández, Ariza, Gómez-Urquiza, Albendín-García, Fuente, & Fuente, 2018). As nurse anxiety and stress increases, patient outcomes may suffer. The mental health of nurse providers directly impacts their ability to attend to their patients (Forstag & Cuff, 2018).

Emotional strength is necessary for nurses to develop resilience, the ability to recover quickly after various hardships and to overcome perceived obstacles. The implementation of a wellness room is one approach in an overall wellness program.

The participating organization implemented a wellness room, called a “*Renewal Room*” to augment their current wellness program. Their current wellness program includes physical wellness screenings, counseling services, recognition awards, and compliment cards. The addition of the renewal room was designed to aid in the promotion of mental wellness and resilience.

The Renewal Room is in a centralized area of the hospital near the cafeteria for easy staff access. All staff can enter and use the room using their identification badge. The renewal room is open 24 hours a day to insure equal availability to all shifts. Staff were informed about the room through a hospital wide email notification and by word of mouth from managers.

The Renewal Room is a small, enclosed space with ambient lighting to promote relaxation. The room is approximately 8 feet by 10 feet and includes a massage chair, journals, a yoga mat, coloring books for adults, inspirational books, aromatherapy, a monitor that displays scenic landscapes, and a wall on which staff can write inspirational messages.

The facility developed the room over four months during late 2019 into 2020. Recommendations made by this DNP team helped guide the design regarding items that were included in the room. The room opened the first week of January 2020 for use by managers. The Renewal Room opened at the end of February 2020 for all staff. Data collection took place approximately six months later at the beginning of August. The organization encouraged employees to use the wellness room by promoting a culture of teamwork in which nurses cover each other's patient care loads to take a brief break. Advertising for the room was limited to posters in each unit's break room and word of mouth from supervisors to employees.

Purpose

The clinical question addressed by this study is: Is a wellness room an accessible and usable component to an established wellness program for nurses?

The purpose of this study is to evaluate the usability of a wellness room that augments an overall wellness program for nurses. The aims of this study include the following:

- 1) Evaluate the "structural" aspects associated with use of the wellness room.
- 2) Assess the perceived processes associated with use of the wellness room.
- 3) Examine the proximal outcomes related to the use and availability of a wellness room for nurses.

Methodology

Design

A program evaluation study design was used. The Donabedian Health Care Quality model was used as a framework. Donabedian's model provides a framework for conceptualizing and evaluating improvement in care (Donabedian, 2005). The framework encompasses three measures: structure, process, and outcome. The basis of the framework states that each measure has an interdependent relationship with the others. See Appendix A for a list of components that comprise each measure. Appendix B identifies specific study components that fit with structure, process, and outcomes.

Subjects

All employees of the organization were permitted to use the room, however, the subjects for this study were limited to the nursing staff. The only inclusion criterion was that individuals be full-time registered nurses. Usage of the room was voluntary and not a criterion for inclusion into the study.

Setting

The organization in this study is a large, Midwestern, urban hospital that serves approximately 22,000 people annually. The hospital has earned Magnet designation for nursing excellence.

Tools and Measures

The primary tool used to measure usability was a brief investigator created electronic questionnaire. Questions were designed to address the three tiers of the Donabedian model: structure, process, and outcomes. The tool collected demographic data and quantitative and

qualitative data related to room usage. See Appendix C for how the tool questions fit within the Donabedian framework.

Data collection

Nurse subjects received an email six months after the Renewal Room opening through the organization's list-serve of full-time nurses. The email contained a letter to nurses explaining the purpose of the study with an invitation to participate. Nurses participated by clicking on a link to the electronic questionnaire created using Survey Monkey. Participants were informed that their responses would be kept anonymous and data would be reported only in aggregate.

Unit charge nurses promoted the survey by reminding nurses of its opening date for one week prior to the questionnaire being distributed. The questionnaire remained open for two weeks.

Data Analysis

Data were gathered by the organization and stored in a research information database. The authors did not have access to the database but received a one-time data set after survey was closed. Authors clustered the questions in the survey related to the aims surrounding (1) the structural aspects associated with use, (2) processes associated with use and (3) outcomes related to use and availability.

Findings

Descriptive Findings

The questionnaire was sent to 940 participants with 148 respondents completing the questionnaire (15.7%). Nurses from 17 different departments responded to the questionnaire, with no single department's response rate noticeably higher than the others. Demographic data for respondents are as follows:

Table 1

Description	Number of respondents	Percentage
Shift		
Day	104	70.27%
Mid	5	3.38%
Night	39	26.35%
Years of Experience		
0-5	45	30.41%
6-10	27	18.24%
11-15	28	18.92%
16-20	15	10.14%
21-25	9	6.08%
26 +	24	16.22%
Gender		
Female	134	90.54%
Male	10	6.76%
Transgender female	0	0
Transgender male	0	0
Non-binary	0	0
Prefer not to answer	4	2.70%

Next the questionnaire asked if the respondent had used the Renewal Room within the last two months. Of the 148 nurses that responded, 22.3% (n=34) indicated they had utilized the Renewal Room, while 77.7% (n = 115) indicated they had not. The nurses that had utilized the room were directed to a separate set of questions regarding the room. If they indicated, they had not used the room they were asked for reasons as to why they did not. Respondents were able to select multiple reasons for not using the room.

Aim 1 Structure

The first four questions related to Structure requested demographic data. The last structural question asked the respondent to list the resources they used when visiting the renewal room. This question was multiple choice with an “Other” option which allowed the respondent to fill in their own answer. Respondents were permitted to select more than one response.

Table 2

Resources used (choose all that apply)	Responses	Percentage
Massage chair	33	97.06%
Journal	3	8.82%
Yoga space	1	2.95%
Coloring books	0	0
Reading material	3	8.82%
TV with relaxing imagery/music	14	41.18%
Aromatherapy	18	52.94%
Other	1	2.94%

Aim 2 Process

The second aim was to assess the perceived processes associated with use of the wellness room. Three survey questions analyzed process components by inquiring about the amount of time spent in the room, reasons for room use, and barriers to room use.

Table 3

Process Measure	Responses	Percentages
Time spent in room (choose 1)		
0-5 minutes	2	5.88%
6-15 minutes	26	76.47%
> 15 minutes	6	17.65%
34 total responses		
Reason for room use (choose all that apply)		
Needed a break from unit	24	70.59%
Traumatic event	5	14.71%
Free time during shift	11	32.25%
Seeking quiet and relaxation	25	73.53%
Other	5	11.76%
34 total responses		
Barriers to room use (open ended)		
Themes:		
Too busy on unit/lack of time	10	34.48%
Room occupied/lack of privacy	11	37.93%
Infection control	3	10.34%
No barriers	6	20.59%
29 total responses		
Reasons for not using room:		
Lack of time	91	81.25%

No interest	23	20.54%
Unaware of room	11	9.82%
Room occupied	7	6.25%
112 participants responded		

Aim 3 Proximal Outcomes

The final aim was to examine the proximal outcomes related to the use and availability of the wellness room. Survey questions analyzed proximal outcomes by inquiring as to recommendations of change for improvement and benefits of using the room.

Table 4

Outcome measure	Responses	Percentage
Change recommendations (open ended)		
Themes:		
More massage chairs	12	41.38%
More space (larger room or more rooms)	4	13.79%
Increased privacy	3	10.34%
Add occupied sign	2	6.90%
No change	10	34.48%
29 total responses		
Benefits of use (check all that apply)		
Decreased stress	33	97.06%
Improved mood	29	85.29%
Improved teamwork	8	23.53%
Improved focus	19	55.88%
No benefit	0	0
Other (open ended)	1	2.94%
34 participants responded		

Discussion

Interpretation of Findings

In the context of this Midwest hospital, the authors found that the Renewal Room was used by a small percentage of the clients. Participants provided feedback on ways to improve the Renewal room.

Aim 1 Structure

This aim focuses on the structure needed for the Renewal room. Questions focused on what was most used in the room. The massage chair was overwhelming the favorite product in the room. The next most used products in the room were the aromatherapy and the TV with relaxing music and images. Recognizing that the top three most utilized products require little effort by the user is important. This observation may lead to identifying other products that may be useful in similar spaces. The next three most utilized products were more involved such as reading, journaling, and yoga. The coloring books were not used at all. Nurse may not find them useful, may not have used them in the past or they were unaware of the option.

Aim 2 Process

Aim two focuses on the process which is evaluated by asking the amount of time spent in room, reasons for room use, and barriers to room use. The room was primarily used from 6-15 minutes when the individual needed time away from the unit or a quiet time for relaxation. Users found it difficult to use the room for longer periods of time or for as long as they liked due to the room already being in use or lack of privacy while in the room.

Aim 3 Proximal Outcomes

In order to improve outcomes from use of the room the authors asked about change recommendations. The most common recommendation for change was to add another massage chair, which is logical as it was the product most used. Additional recommendations included a larger room and more privacy for the user of the room.

Those who did find time to use the room found it to be primarily beneficial in decreasing stress. They also found it resulted an improved mood and improved focus. Although benefits varied between users, nobody who used the room felt it was not worth the effort.

Strengths of the Study

The primary strength of this study is that the wellness room itself was well implemented. The room used many of the elements recommended in available literature such as massage chair, coloring books, ambient lighting, wall color, and more (Belini Jacques et al., 2017; Markwell et al., 2016). The room was easily accessible and used by participants electing to do so. A second strength of this study was the support of the hospital administration in implementing the room and in conducting the survey. The third strength of this study is its participation in a growing field of upcoming research addressing resiliency and overall wellness of nursing staff. Although the data outcomes were limited, the findings and methods are a positive step toward identifying useful tools to help combat workplace fatigue and burnout.

Limitations of the Study

The first limitation of the study was the use of a convenience sample in a single hospital organization. The small sample size is a threat to external validity and prevents generalization of the results. Additionally, only 30% of the nurses that received the questionnaire responded. The authors do not know if the remainder of the nurses on staff did not use the room or did so and just did not complete the survey. The third limitation is the reliance on self-report measures.

The fourth limitation was the delay in data collection due to the COVID-19 pandemic. The survey was originally intended to be implemented in April but was delayed until July. Between the opening of the room and data collection, room use was not promoted to improve limiting the spread of COVID-19. Survey results may have been influenced by the pandemic with caused increased patient loads and fewer opportunities for self-care. Future studies should include time series surveys and follow-up of the participants in order to verify the long-term

effects of the intervention. Future studies should investigate, in addition to self-report measures, the reduction in fatigue and stress within the workplace.

Recommendations

The primary recommendations of the nurses for room configuration were the addition of another massage chair and implementation of measures to increase user privacy. Respondents also recommended increasing advertising and room promotion to improve awareness of the room and enhance use of the space.

A barrier to room use identified by respondents was lack of time to use the room. Reviewing staffing models to provide coverage so nurses can leave their unit for 10-15 minutes could improve usability. Another strategy to improve usability is creating adequate space for a wellness room. If stakeholders find appropriate benefit and adequate space, replication of the renewal room in another area might alleviate congestion in the room and expand availability to a larger population of nursing staff. A separate room on each nursing floor for closer access and more availability would be ideal.

Conclusions

The Renewal Room was implemented as recommended by the authors. Nursing staff were contacted via email six months after the room opened to complete an evaluation survey. No changes were made to the room at this time. Those who did not use the room listed barriers to lack of room usage as primarily lack of time and the room was busy. The findings from this study are limited due to small sample size but do suggest the value of a place for nurses to relax and rejuvenate during or after a stressful shift. Further research is recommended to provide additional perspectives on the use of wellness rooms.

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See Appendix E for corresponding superscript numbers

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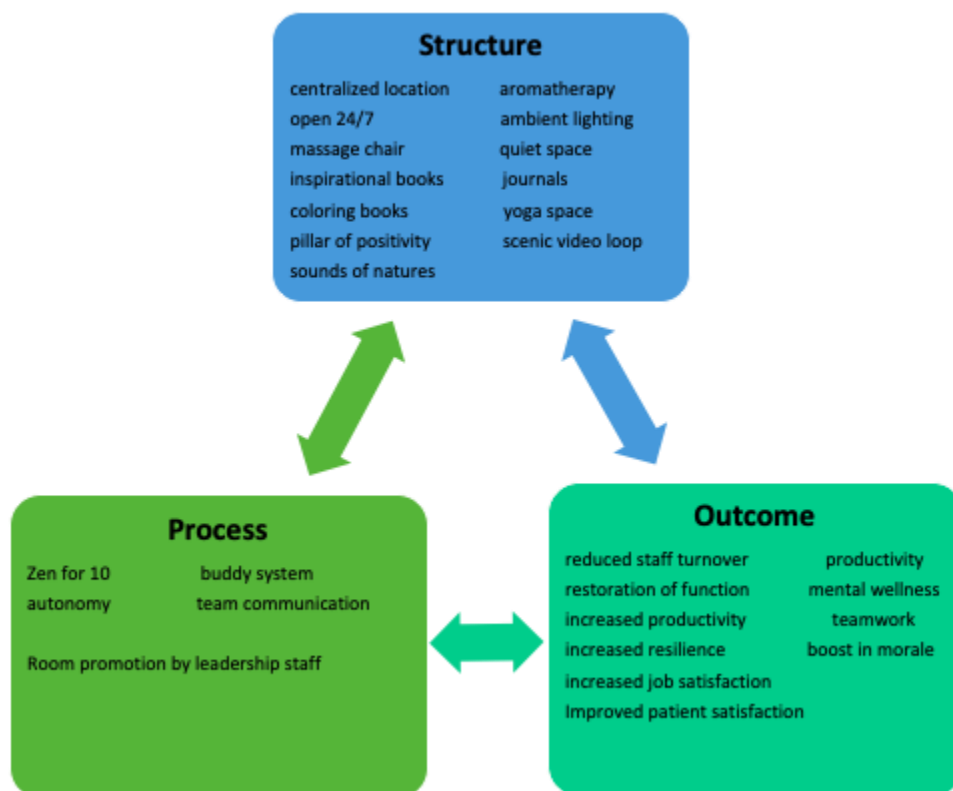
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Appendix A
Donabedian Health Care Quality Model

Structure	Process	Outcomes
Organizational Structure <ul style="list-style-type: none"> • Staffing models • Administrative systems • Magnet Status • Specialty certification • Education/training programs Material Resources <ul style="list-style-type: none"> • Technology/tools • Equipment • Facilities • infrastructure Personnel <ul style="list-style-type: none"> • Provider qualifications • Provider characteristics • Leadership • Turnover • incentives 	Patient experience <ul style="list-style-type: none"> • Coordination of care • Team communication • Diagnosis • Treatment • Care delivery components • Interventions Staff experience <ul style="list-style-type: none"> • Management • Decision-making process • Performance improvement processes • Interprofessional relationships Policies/procedures/protocols/pathways	Recovery Restoration of function Clinical results <ul style="list-style-type: none"> • Infection • Mortality • Readmission Patient satisfaction Reimbursement Quality of life Symptom control Productivity Cost

Appendix B

Renewal Room Study Specific Measures



The following Appendices are for the document version submitted as a part of the DNP Portfolio.

These appendices are not appropriate for a manuscript to be submitted to the American Nursing Journal. They contain data collected as part of the preproposal investigation and as such were important to the creation of the proposal. These data may be included in a future, second manuscript.

Appendix C (For UNMC DNP version only)
Tool Questions and Donabedian Framework

Structure
<p>What is your primary unit?</p> <p>Which shift do you primarily work?</p> <p>How many years have you been an RN?</p> <p>To which gender identity do you most identify?</p> <p>Which resources do you use the most in the Renewal Room? (Check all that apply)</p> <ul style="list-style-type: none"> a. Massage chair b. Journaling c. Yoga space d. Coloring books e. Reading material f. Sound machine/music g. aromatherapy h. Other (Please list): _____
Process
<p>Approximately how much time do you spend in the Renewal Room per visit?</p> <p>What prompted you to use the Renewal Room (needing a break, a traumatic event, a certain time of day, etc.)? Check all that apply.</p> <ul style="list-style-type: none"> a. Needed a break from the unit b. Traumatic event c. Free time during shift d. Seeking quiet time and relaxation e. Zen for Ten f. Other (Please describe): _____ <p>Are there any barriers to room use? If so, what are they?</p>
Outcome
<p>Have you used the Renewal Room in the past 2 months?</p> <p>If you answered “No” to using the Renewal Room, what prevented you from using/wanting to use the Room? Check all that apply.</p> <ul style="list-style-type: none"> a. Lack of time b. No interest c. Unaware of Room d. Room was busy <p>What changes would you make to the Renewal Room?</p> <p>What benefits do you experience from using the Renewal Room (Check all that apply)?</p> <ul style="list-style-type: none"> a. decreased stress b. improved mood c. improved teamwork d. improved focus e. no benefit f. Other (Please explain): _____

Appendix D (For UNMC DNP version only)

Organization Responses to Interviews

1. In your organization, what triggered the need for or the decision to have a wellness room in your organization?

Baxter Regional	Combat compassion fatigue and burnout
Cincinnati Children's	ER wanted a room for a post code/death to debrief, some units seeing fatigue and burnout
Lasting Hope	A need to respond to level of distress from employees. Try to address it in a "concrete way". At the time there was not a place for staff to get away.
Ascension Health	No response
Hennepin County	Providers often share offices with other providers and/or learners (residents, students, etc.) so it can be hard to have space to themselves to: make a person call, have a quiet moment (if stressed, a poor patient outcome, etc.), so the Reset Room was developed as a place providers can access 24/7 when they need a quiet space.

2. Can all staff in the organization/hospital use the wellness room?

- **Or is the use of the wellness room limited to use by the nursing staff?**

Baxter Regional	Nurses, techs
Cincinnati Children's	Nurses, HUCs, Techs able to use it.
Lasting Hope	The relaxation room is the former break room. Any staff member can use it.
Ascension Health	All staff- have had to set boundaries (not a sleeping space for residents, no eating lunches or checking phones)
Hennepin County	The Reset Room is designed for all providers (doctors, physician assistants, nurse practitioners, etc., anyone accredited through the Office of the Medical Staff).

3. How do staff access the wellness room?

- **Is it a "keyed" entry?**
- **Is the room open for limited hours or is it available / open 24/7?**

Baxter Regional	Key kept in ICU. 24/7
Cincinnati Children's	Some are swipe entry, while others have a key. The key makes it less accessible. Badge swiping allows for convenience and increased accessibility, also for tracking. Open 24/7.
Lasting Hope	Relaxation room is the break room --- keyed entry. Open 24 hours.
Ascension Health	key difficult because have to go get key at nurses' station and not always someone there to hand it out- tend not to do that as much. Need to have swipe
Hennepin County	The room has a cipher lock (installation cost ~\$1500) on it and can be accessed 24/7. The code is shared with all providers at new provider orientation, through email newsletters, via the Wellness Committee, at provider meetings, etc.

4. What types of activities do staff engage in when using the wellness room?

Baxter Regional	No response
Cincinnati Children's	No response
Lasting Hope	No response
Ascension Health	No response
Hennepin County	Make phone calls, rest/sleep, eat, cry, facetime/skype with family, meditate, whatever they want. We have a comfortable chair and a yoga mat available. There is also a sound machine, flames candles, a terrarium, and books about wellness in the space. Meditation and breathing exercises are provided in the space.

5. How did you determine what types of activities staff could engage in when using the wellness room?

----(for example—input from staff, or based on activities reported in the literature)

Baxter Regional	literature
Cincinnati Children's	literature
Lasting Hope	literature – 5 senses
Ascension Health	Different areas have different things
Hennepin County	They can do anything they want in the space, it's for them.

6. Are there reusable supplies kept in the wellness room?

- **if yes—what disposable supplies kept or stocked in the wellness room?**

Baxter Regional	Candy bowl, lotions, compassion fatigue/burnout pamphlets gets restocked
Cincinnati Children's	No response
Lasting Hope	Magazines
Ascension Health	Journaling supplies, hot water and tea, yoga mat, chairs
Hennepin County	The room is supplied with bottled water kept either in a refrigerator (for cold water) or a shelf (for room temp. water). Staff check the space once a day to make sure it's clean and stocked. To "create" the space we purchased: a lamp & lightbulbs, a night light, a yoga mat, a sound machine, a terrarium, other assorted plants (later changed to fake plants), a few wellness books, and a small refrigerator. The total cost was ~\$150. The space and furniture was acquired through the hospital (from other peoples' offices).

7. How large is the space for your wellness room?

- **Is it one large room? Or are there separate rooms?**
- **Or are portions of the room partitioned from other parts of the room?**
- **What did you use to guide your choice of paint color and decor for the room?**

Baxter Regional	One large room approx. 12 x 15.
Cincinnati Children's	One space per department that has created a respite room. Some are done better than others – depends on leadership of unit.
Lasting Hope	One large room (relaxation room) has been revamped from their former break room. The room has a massage chair that has been partitioned off by dividers. There are tables, chairs, a television, magazines, newspapers, and hand-outs on coping with stress.
Ascension Health	There are 5 different rooms in this organization, and some are larger than others
Hennepin County	It is one room. The room is small but big enough for a comfortable chair, a nice sitting chair, and a wheeled office chair for the computer. With all these chairs, there is still room for a full-size yoga mat to be laid out and a 6 ft. tall person to lay down. The overhead lighting is dimmable, there is a nightlight if they want all the lights out, there is a small lamp on a nice table that has enough light for the room. The room color is neutral, the art is relaxing (outdoors), the sound machine has 5 settings for the users choice (or none if they choose), we tried to keep living green plants in the space, but they didn't do well, so we have fake green plants, but they look nice and it's dark enough no one realizes they are not alive (so far).

8. Who is tasked with the upkeep of the room? Is it staffed?

Baxter Regional	Room is self-maintaining except for items that are re-stockable
Cincinnati Children's	Dependent upon amenities provided. May need replenishing Keurig, color pages, tea/coffee. What budget does it come from? Unit-based budget. Administrative assistant for unit responsible for upkeep/stocking.
Lasting Hope	Staff is expected to clean up after themselves. It is not staffed.
Ascension Health	Not staffed, does have to be kept cleaned up and stocked

Hennepin County	The room is near wellness staff offices, so it's easy to check on. Hospital cleaning staff vacuum and take out the trash.
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9. Do you track utilization of the wellness room?

- If yes, what is tracked? How is tracking conducted?
- What is the volume of nurses/ staff who use the wellness room?

Baxter Regional	Not tracked. Room is well used, but no issues of abusing the opportunity to take breaks.
Cincinnati Children's	No tracking on 4 th /5 th floor. Room for this project not approved.
Lasting Hope	No response
Ascension Health	No measurement of use- just a part of the culture of the system
Hennepin County	There is no formal tracking of its usage. We do note when things have moved or when the sign has been switched to "occupied" and could use those as trackers for use. In general, the space is used overnight (unknown amount of times) and during the day (3-4 times).

10. What strategies does your organization use to engage staff / nurses to use the wellness room?

Baxter Regional	No response
Cincinnati Children's	Zen for 10 strategy – charge RN gives Zen cards and buddy assignments. RNs pick a time to use room. RNs not using breaks even with buddy system!! Reasons: don't want to ask for help, short staffing, etc.
Lasting Hope	No current strategies in place. Staff are encouraged to use the room and take breaks for themselves, but often do not.
Ascension Health	Part of the culture of the system
Hennepin County	Word of mouth, electronic newsletters and emails, the Provider Wellness Committee, mentioned at Medical Staff meetings, etc.

11. What are the guiding parameter for the staff use of the wellness room when they are on duty?

- Can staff just decide they need the room or does a charge nurse need to provide coverage for nurse requesting to use the wellness room during a shift?

Baxter Regional	Staff use the room when they see fit. Charge RN and educator provides coverage while a nurse takes a short break.
Cincinnati Children's	No response
Lasting Hope	No guiding parameters in place. Have not needed to create any due to staff not taking breaks or utilizing the room very often.
Ascension Health	No response
Hennepin County	Medical staff can use the space when they want. No need to request to use the space if it's available (meaning the door sign indicates it is "available").

12. What was the budget for setting up the wellness room?

- What are the approximate monthly costs for keeping the wellness room operational?

Baxter Regional	Extra room on the unit available. Idea pitched to CEO and CEO encouraged Susan to approach the foundation for \$1500 and was surprised when she received \$5000. Used only \$2500. Bought furniture (sofa, chair, desk). Massage chair was donated. Bought artwork.
Cincinnati Children's	No response
Lasting Hope	Zero to minimal costs. Erick replenishes coping with stress handouts as needed. Repairs to the massage chair has been the most expensive, otherwise room maintains itself.
Ascension Health	No response
Hennepin County	Monthly expenses are the bottled water, approx. 10 bottles a month (not everyone who uses the space drink the water). Staff time to staff the space = 20 mins. a month.

13. a. What do you see as the strengths of the organization/hospital having a wellness room?**b. What are the negative aspects of having a wellness room?**

Baxter Regional	No response
Cincinnati Children's	No response
Lasting Hope	No response
Ascension Health	a. Staff use it to decompress, relax, refresh, and encourage each other b. Has been used as a sleeping room by residents- lots of blankets and trash left behind and have since been banned from using the room
Hennepin County	a. It's a low cost space that provider appreciate. For little investment an institution can show it cares for its providers and show it recognizes their challenges (shared work space). b. None I can think of.

14. Have there been any patient care issues or concerns while staff leave the unit to use the wellness room?

Baxter Regional	No. Room is used appropriately. There are some staff members that under utilize the room. Charge RNs and educators go and relieve staff to take breaks. Family culture, cohesive team, very supportive – make sure breaks happen and staff gets what they need to be successful.
Cincinnati Children's	None that I've heard of.
Lasting Hope	No
Ascension Health	No response
Hennepin County	No

15. Has the wellness room made a positive impact on reducing burnout and/or increasing resilience of your nursing/ healthcare staff?

Baxter Regional	Increase in retention rates. No formal assessment for increasing resilience or decreased burn out.
Cincinnati Children's	Have not observed wellness rooms affecting burnout or resiliency. Have not studied this in depth enough to determine wellness room effects.
Lasting Hope	Not sure. It is not being tracked, measured, or utilized fully, so difficult to say.
Ascension Health	No response
Hennepin County	Providers have self-reported (via feedback cards in the Reset Room), that the space gave them a place to cry, make difficult phone calls, a place to calm down, etc. So while we don't know how the space directly impacted the overall hospital wellness, we do know for those individuals who self-reported, it made a big difference in their day.

Appendix E (For UNMC DNP version only)
Overall Wellness Related to 12 Organizations

Organization	Room Name	Purpose	Benefits
¹ Walden University Minneapolis, MN	“Watson Room”	Decrease compassion fatigue Reduce productivity Increase staff turnover and sick days Lead to patient dissatisfaction and risks to patient safety	Watson Room proved to be successful in increasing compassion satisfaction, decreasing burnout, and decreasing secondary trauma/CF respectively.
² Cancer Treatment Centers of America (CTCA) Winthrop Harbor, IL	“Renewal Room”	Room idea for renewal rooms was implemented after attending training about holistic nursing and its benefits	Almost all the nurses who used the room (96%) reported they felt more at ease after a visit. Due to of the renewal room’s popularity, CTCA Midwestern has built several more rooms for nurses to use.
³ Baxter Regional Medical Center Mountain Home, AR *phone interview	No special name	No data as to why room was implemented	Has seen an increase in retention rates. Charge RN and educator RN provide relief for nurses to take breaks.
⁴ Cincinnati Children’s/ Northern Kentucky University *phone interview	“Respite Room”	Implemented “Zen for 10’ intervention to increase utilization of respite rooms. Charge RN provides nurses with a “Zen” card that contains inspirational quote and assigns a team buddy to support in a wellness break	No benefits noted in data
⁵ Lasting Hope Omaha, NE *phone interview	No special name	Noticed staff retention was dropping, shift in staff attitudes	No benefits noted in interview
⁶ Ascension Health *phone interview	No special name	Reduce moral distress Promote holistic approach	Education on the purpose of the room
⁷ Wellspan York Hospital York, PA	“Serenity Room”	Reduce physical, emotional, and mental stress in nurses’ daily work.	No benefits noted in data
⁸ Christiana Hospital Newark, DE	“OASIS room” <i>Opportunity to Achieve Staff Inspiration and Strength</i>	The goal was to create the conditions for the MICU staff to find joy in their work and in doing so improve the experience of providing care	1 year after launch – 12% decrease on turnover, monthly mean unplanned time off decreased by 18%

⁹ Hennepin County Medical Center Minneapolis, MN	“Reset Room”	For physicians only. If there is a traumatic event they wish to recover from, or they just want to get away for a moment, make a phone call or take a short nap	Did not monitor usage because leadership didn’t want users to feel like they were being watched
¹⁰ University of Pennsylvania	“The Center”	Done in response to the Joint Commission 2010 article <i>Caring for our own: deploying a system wide second victim rapid response</i> , which supports the need for a private location away from the care environment for nurses to relieve their stress and renew themselves after stressful events	Data collected by UPENN shows nurses report increased job enjoyment and fewer have expressed plans to leave direct patient care
¹¹ Clara Maass Medical Center Belleville, NJ	“Tranquility Room”	Nurses identify need for support, break, and caring structure	Room used 46 times over a 15-week period by 20 staff nurses. Emerging themes from questionnaire included: refocus, calm, break, renewal, comfort, support, care.
¹² Rush Copley Medical Center Aurora, IL	“Restoration Room”	Reduction in physical exhaustion and emotional burnout for RNs experiencing on-the-job stressors	clear their minds to reconnect with patients get out of the “stressful spin” receive a mental boost to get through their shift refocus to improve patient outcomes

*See corresponding number in references for article. Additional phone interview data available where indicated.

Appendix F (For UNMC DNP version only)
Room Components of 12 Organizations

ORGANIZATION	COMPONENTS OF ROOM
Walden University Minneapolis, MN	Quiet, vacant room Warm walls colors, small waterfall, massage chair, soothing scents Device free environment
Cancer Treatment Centers of America (CTCA) Winthrop Harbor, IL	Former spacious closet Massage chair, aromatherapy, yoga, journals, and inspirational books
Baxter Regional Medical Center Mountain Home, AR	Room size: 12' x 15' room Chair, desk, sofa, massage chair, lava lamp, lotion, candy, adult coloring books, journals, inspirational artwork, blue/lavender walls Device free environment
Cincinnati Children's/ Northern Kentucky University	Wall mural, massage chair, yoga mat, water, chocolates, Keurig, coloring pages, snacks, a chalkboard to share good news/comments/inspirational quotes
Lasting Hope Omaha, NE	Large break room: part of which is still used for breaks, tables, couch, limited quiet space, TV, massage chair, foot massager, heating pads, educational wellness pamphlets Small lactation room: utility closet, very quiet, mood lighting, able to lock from inside, aroma therapy, coloring
Ascension Health	Various locations throughout system Some rooms with massage chairs, tea, table& chairs, journaling, CD Player, inspirational readings, yoga mat, prayer rug, salt lamps, soft lighting
Wellspan York Hospital York, PA	Vacant room in hospital Charitable donations of furnishings, books, music, electronics
Christiana Hospital Newark, DE	Medium sized vacant room in hospital unit (MICU – 3E unit) Low-lighting, massage chair, a fountain, curtains, Keurig, chocolates, a sound machine, zen garden with rakes and stones
Hennepinn County Medical Center Minneapolis, MN	LED lights, flameless candles, sound machine, comfortable chairs, several plants, “in use” sign on the door Employee contributed pieces of art to better personalize the space
University of Pennsylvania	Large, multi-purpose and multi-room space

	<p>Relaxation room with 3 massage chairs, Small meditation room with 1 massage chair, Refreshment room, Computer café</p> <p>Large open space for yoga and other classes such as Weight Watchers, Zumba, & nutrition lectures</p>
Clara Maass Medical Center	Small room on nursing unit
Belleville, NJ	Soothing, secluded, waterfall feature, music, reading materials.
Rush Copley Medical Center	“Restoration Room”
Aurora, IL	

* See corresponding number in references for article. Additional phone interview data available where indicated.

Appendix G (For UNMC DNP version only)
Assessment Tool

1. 4. What is your primary unit?
 - a. Emergency Department
 - b. 4 South
 - c. 5 South
 - d. 6 South
 - e. 6 North
 - f. 7 South
 - g. 7 North
 - h. 8 South
 - i. 8 North
 - j. 9 South/North
 - k. OR
 - l. Pre op
 - m. PACU
 - n. Cath Lab
 - o. GI lab
 - p. Cardiac Rehab
 - q. Imaging
 - r. Utilization Review
 - s. Employee Health
 - t. Administration
 - u. Palliative/Hospice
2. Which shift do you primarily work?
 - a. Day shift
 - b. Mid shift
 - c. Night shift
3. How many years have you been an RN?
 - a. 0-5
 - b. 6-10
 - c. 11-15
 - d. 16-20
 - e. 21-25
 - f. 26-30
 - g. 31-35
 - h. 36-40
 - i. 40+
4. To which gender identity do you most identify?
 - a. Male
 - b. Female
 - c. Transgender female

- d. Transgender male
- e. Gender variant/non-conforming
- f. Prefer not to answer

5. Have you used the Renewal Room in the past 2 months?

- a. Yes (skip to question 7)
- b. No

6. If you answered “No” to using the Renewal Room, what prevented you from using/wanting to use the Room? Check all that apply.

- a. Lack of time
- b. No interest
- c. Unaware of Room
- d. Room was busy

-----Survey automatically ends after #6 if respondent answered “No” to using the room -----

7. Approximately how much time do you spend in the Renewal Room per visit?

- a. 0 to 5 minutes
- b. 6 to 15 minutes
- c. Greater than 15 minutes

8. What prompted you to use the Renewal Room (needing a break, a traumatic event, a certain time of day, etc.)? Check all that apply.

- a. Needed a break from the unit
- b. Traumatic event
- c. Free time during shift
- d. Seeking quiet time and relaxation
- e. Other (Please describe): _____

9. Which resources do you use the most in the Renewal Room? (Check all that apply)

- a. Massage chair
- b. Journaling
- c. Yoga space
- d. Coloring books
- e. Reading material
- f. Sound machine/music
- g. aromatherapy
- h. Other (Please list): _____

10. Are there any barriers to room use? If so, what are they?

11. What changes would you make to the Renewal Room?

12. What benefits do you experience from using the Renewal Room (Check all that apply)?

- a. decreased stress
- b. improved mood
- c. improved teamwork

d. improved focus

e. no benefit

f. Other (Please explain): _____